

MCCCD WOMEN'S MENTOR PROGRAM

SPONSORED BY WOMEN'S LEADERSHIP GROUP

APPLICATION 2008 - 2009

The Women's Leadership Group (WLG) Mentor Program is designed to provide women in MAT, PSA, M&O, Crafts, College Safety and Specially Funded positions with an opportunity to focus on professional goals and take advantage of advancement opportunities within the Maricopa County Community College District (MCCCD). (This program is not designed to prepare individuals for faculty positions.) MCCCD encourages employees to prepare for future jobs throughout the District and WLG believes that women within the District seek to be challenged by new opportunities. Participants must be full-time and have been a Board approved employee for at least two (2) years.

Name: _____ College/District Office: _____
Job Title: _____ Department: _____
Employee Group (circle): MAT PSA M&O COLLEGE SAFETY CRAFTS SPECIALLY FUNDED
Grade: _____ Work phone: _____
E-mail address: _____
Board Approved Date (**Must be before September 1, 2006**): _____

1. Briefly describe your professional path. Include key events that have brought you to where you are today. What positions have you held in the Maricopa Community Colleges?

2. What actions would you consider taking to achieve your goals? (Circle all that apply)
 - a. Attend additional MCCCD training
 - b. Take college/university courses
 - c. Move to a different campus
 - d. Move to a different department
 - e. Seek responsibility outside of day-to-day role (i.e., committee membership)
 - f. Participate in professional growth programs
 - g. Other

3. What are your career goals in Maricopa in the next two to five years? How would the Mentor program help you to achieve your goals?

4. Describe your educational background, including the highest degree earned.

5. Mentors are assigned by the program, not selected by participants. Please describe the strengths, job knowledge, and skills you are interested in learning from a mentor?

Return your application to Cheryl Crutcher or Kay Martens at SMCC by **Tuesday, June 10, 2008.**

The 2008-09 program begins **September 2008** with an orientation session and continues **through April 2009. Participants are required to attend** all of these day long Friday seminars each month, and to meet regularly with their mentor. These activities will occur during normal work hours. Your signature acknowledges that you will honor these requirements. The Mentor Program Planning Committee reserves the right to remove from the program applicants who do not participate in required activities.

Applicant Name: _____ Signature: _____ Date: _____

Supervisor Name: _____ Signature: _____ Date: _____

President/Vice

Chancellor Name: _____ Signature: _____ Date: _____